PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

57 98 033

CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	
T-/	DEAL OLAIMO		(Column 1)		(Column 2)		1 .	TYPE [OR	SMALL	ENTITY
TOTAL CLAIMS			67		·			RATE	FEE.		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			67 minus 20=		• 47			X\$ 9=		OR	X\$18=	846
INDEPENDENT CLAIMS			3 minus 3 =		. 48		·	X43=		OR	X86=	}
MU	JLTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	_
* if	the difference	in column 1 is	less than ze	zero, enter "0" in column 2			Ļ	TOTAL		OR	TOTAL	1616
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)		(Column 2)			_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
								TÖTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	PENDENT	CLAIM		!	+145=		OR	+290=	
								TOTAL			TOTAL	•
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI ⁻ TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	lĺ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	·	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=										.000	
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290= TOTAL	
**	f the "Highest Nun	nber Previously Pai nber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	AE	TOTAL DDIT. FEE		OR ,	DDIT. FEE	
		ber Previously Paid					r foun	d in the app	ropriate box	in col	ımn 1.	